

UNITED STATES BANKRUPTCY COURT Northern District of Texas (Dallas Division)

PROOF OF CLAIM

Name of Debtor: **ERICKSON RETIREMENT COMMUNITIES**

Case Number: **09-37010-56J111**

NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.

Name of Creditor (the person or other entity to whom the debtor owes money or property):

**BRADLEY T KNIGHT**

Check this box to indicate that this claim amends a previously filed claim.

Name and address where notices should be sent:

20835749006496  
KNIGHT, BRADLEY T  
236 EAST MONTGOMERY STREET  
BALTIMORE, MD 21230

RECEIVED  
JAN 11 2010  
BMC GROUP

Court Claim Number: \_\_\_\_\_  
(If known)

Filed on: \_\_\_\_\_

Name and address where payment should be sent (if different from above):

**BRADLEY T KNIGHT**  
**5930 ROYAL LAKE SUITE E BOX 183**

Telephone number: **DALLAS TX 75243**

**408 802 0201**

Check this box if you are aware that anyone else has filed a proof of claim relating to your claim. Attach copy of statement giving particulars.

Check this box if you are the debtor or trustee in this case.

1. Amount of Claim as of Date Case Filed: \$ 1,000,000<sup>00</sup>

If all or part of your claim is secured, complete item 4 below; however, if all of your claim is unsecured, do not complete item 4.

If all or part of your claim is entitled to priority, complete item 5.

Check this box if claim includes interest or other charges in addition to the principal amount of claim. Attach itemized statement of interest or charges.

5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of your claim falls in one of the following categories, check the box and state the amount.

Specify the priority of the claim.

Domestic support obligations under 11 U.S.C. §507(a)(1)(A) or (a)(1)(B).

2. Basis for Claim: SERVICES PERFORMED  
(See instruction #2 on reverse side.)

3. Last four digits of any number by which creditor identifies debtor: 0916

3a. Debtor may have scheduled account as: \_\_\_\_\_  
(See instruction #3a on reverse side.)

Wages, salaries, or commissions (up to \$10,950\*) earned within 180 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. §507 (a)(4).

4. Secured Claim (See instruction #4 on reverse side.)

Check the appropriate box if your claim is secured by a lien on property or a right of setoff and provide the requested information.

Nature of property or right of setoff:  Real Estate  Motor Vehicle  Other

Describe:  
Value of Property: \$ \_\_\_\_\_ Annual Interest Rate \_\_\_\_\_ %

Amount of arrearage and other charges as of time case filed included in secured claim,

if any: \$ \_\_\_\_\_ Basis for perfection: \_\_\_\_\_

Amount of Secured Claim: \$ \_\_\_\_\_ Amount Unsecured: \$ \_\_\_\_\_

Contributions to an employee benefit plan - 11 U.S.C. §507 (a)(5).

Up to \$2,425\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. §507 (a)(7).

Taxes or penalties owed to governmental units - 11 U.S.C. §507 (a)(8).

Other - Specify applicable paragraph of 11 U.S.C. §507 (a)(\_\_\_\_).

Amount entitled to priority:

\$ 10,950

\*Amounts are subject to adjustment on 4/1/10 and every 3 years thereafter with respect to cases commenced on or after the date of adjustment.

6. Credits: The amount of all payments on this claim has been credited for the purpose of making this proof of claim.

7. Documents: Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. You may also attach a summary. Attach redacted copies of documents providing evidence of perfection of a security interest. You may also attach a summary. (See instruction 7 and definition of "redacted" on reverse side.)

DO NOT SEND ORIGINAL DOCUMENTS. ATTACHED DOCUMENTS MAY BE DESTROYED AFTER SCANNING.

If the documents are not available, please explain:

Date: 4/11/10

Signature: The person filing this claim must sign it. Sign and print name and title, if any, of the creditor or other person authorized to file this claim and state address and telephone number if different from the notice address above. Attach copy of power of attorney, if any.

**BRADLEY T KNIGHT**

FOR COURT USE ONLY

Erickson Ret. Comm. LLC



00344



June 27, 2008

Mr. Brad Knight

Dear Brad:

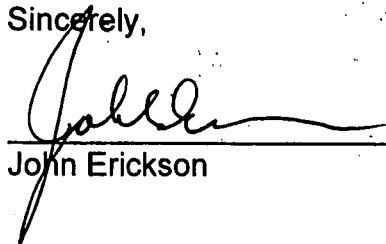
I am delighted to confirm our offer of employment and welcome you as a new member of the **Erickson Retirement Communities** team. As previously agreed upon, your start date will be June 30, 2008 with the title of Chief of Staff. Because of your employment at RLTV, there will be no need to complete an employment eligibility document nor have a drug screening or criminal background check.

Your biweekly compensation will be \$38,462, for a targeted annual compensation of \$1 million. In addition, after a successful 90 day transition period with our new CEO, you will receive a bonus of \$1 million. At my discretion, this bonus could be increased to \$2 million with the stabilization of RLTV through the completion of the Comcast agreement and other distribution agreements.

You will continue to accrue your current paid time off and maintain your same insurance and 401K benefits.

Please signify your acceptance of this offer on the terms and conditions stated. I look forward to working with you.

Sincerely,

  
\_\_\_\_\_  
John Erickson

  
\_\_\_\_\_  
Brad Knight

Date 8 JULY 08